



Massachusetts Department of Environmental Protection
Bureau of Waste Site Cleanup

BWSC-101

RELEASE LOG FORM

Release Tracking Number

2 - 15225

A. LOG INFORMATION:

Log Date: 4/26/04
Log Time: 1:38

TYPE OF CALL (check one):

- ☒ Release or TOR
☐ Complaint ☐ Inquiry

Check one:

☐ AM ☒ PM

CALLER (check one):

- ☐ PRP
☐ Public Safety Official
☐ Other Government Agency
☐ Citizen
☐ Anonymous
☒ LSP or PRP Agent
☐ Other Person:

Use of Form:
(check one)

- ☒ Initial Office
☐ Boston
☐ Amended

DISPOSITION OF CALL (check the one most applicable disposition below):

If selecting one of the two following options, assign a Release Tracking Number (RTN) in the space provided above:

- ☒ Reportable Release or Threat of Release
☐ Release or Threat of Release Less Than Reporting Threshold

Select one of the two following options only if an RTN was previously assigned:

- ☐ Release Notification Retraction (with BWSC-103 only)
☐ Not a 21E Release

If selecting any option below, do not assign an RTN:

- ☐ Release or Threat of Release Exempt from Reporting Requirements (not referred)

- ☐ Report Referred to Other Agency or Division

Referred To:

Reporting Person: Mike Robertson

Telephone (508) 756-1339 Ext.: _____

Organization: New England Disposal Tech.

- ☐ No Action Taken ☐ Site Visit ☐ Compliance Site Visit

B. RELEASE OR THREAT OF RELEASE LOCATION:

Street: 355 Main St. Location Aid: Roadway Release

City/Town: Northbridge Adequately Regulated Status: _____ Fee Status: _____

Type of Location (check all that apply): ☐ Commercial ☐ Industrial ☐ Residential ☐ School ☐ Municipal ☐ State
☐ Federal ☐ Right of Way ☒ Roadway ☐ Water Body ☐ Open Space Other: _____

Release Tracking Number of Associated Transition or Tier Classified Site, if any: _____

C. RELEASE OR THREAT OF RELEASE (TOR) INFORMATION:

Notification Date, if different from log date: _____

"One Year" Status Date, if not one year after notification date: _____

Date and time reporting person obtained knowledge of the Release or TOR. 4/26/04 Time 12:50 ☐ AM ☒ PM

IF KNOWN, record date and time Release or TOR occurred. Date: _____ Time: _____ ☐ AM ☐ PM

Check all conditions that apply to the Release or Threat of Release:

2 HOUR REPORTING CONDITIONS

- ☒ Sudden Release
☐ Threat of Sudden Release
☐ Oil Sheen on Surface Water
☐ Poses Imminent Hazard
☐ Could Pose Imminent Hazard
☐ Release Detected in Private Well
☐ Release to Storm Drain
☐ Sanitary Sewer Release (Imminent Hazard Only)

72 HOUR REPORTING CONDITIONS

- ☐ Subsurface NAPL = or > 1/2 Inch
☐ UST Release
☐ Threat of UST Release
☐ Release to Groundwater near Water Supply
☐ Release to Groundwater near School or Residence

120 DAY REPORTING CONDITIONS

- ☐ Release of HM(s) to Soil or Groundwater > RC(s)
☐ Release of Oil to Soil > RC(s) and Affecting > 2 Cubic Yards
☐ Release of Oil to Groundwater > RC(s)
☐ Subsurface NAPL = or > 1/8 Inch and < 1/2 Inch
☐ Check here if Substantial Release Migration exists in connection with 120 Day Reporting Conditions

Source of Release or TOR (check all that apply): ☐ UST ☒ Pipe/Hose/Line ☐ AST ☐ Drums ☐ Transformer ☐ Boat
☐ Tanker Truck ☒ Vehicle ☐ Unknown ☐ Other Specify: _____

Federal LUST Eligible? ☐ Yes ☒ No ☐ Unknown

DFS UST/AST Facility ID# _____

SECTION C IS CONTINUED ON THE NEXT PAGE.

DFS UST/AST Tank ID# _____



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C. RELEASE OR THREAT OF RELEASE (TOR) INFORMATION: (continued)

Type of Release or TOR (check all that apply): ☒ Leak ☐ Spill ☐ Rupture ☐ Dumping ☐ Tank Removal ☐ Overfill

☐ Vehicle Accident ☐ Test Failure ☐ Fire ☐ Threat Only ☐ Unknown ☐ Other Specify:

Identify Media and Receptors Affected: (check all that apply) ☐ Air ☐ Groundwater ☐ Surface Water ☐ Sediments ☐ Soil

☐ Wetlands ☐ Storm Drain ☒ Paved Surface ☐ Private Well ☐ Public Water Supply ☐ Zone 2 ☐ Residence

☐ School ☐ Unknown ☐ Other Specify:

O or HM Released
Hydraulic oil

(check one)

CAS # (if known)

Amount or Conc.

Units

RCs Exceeded?

☒ O ☐ HM
☐ O ☐ HM

20

gal

yes

Description of Release or Threat of Release:

Hydraulic line on a trash truck ruptured, releasing about 20 gallons of hydraulic fluid to pavement only. Driver used a spill kit to contain the release. IRA: Remove and properly dispose of speedi dri and inspect any storm drains for impacts.

D. PRP INFORMATION:

☐ PRP Unknown ☒ PRP Performing Response Actions ☐ Check here if additional involved parties are listed on an RLFA.

☐ PRP Unwilling or Unable to Perform Response Actions. Who is? ☐ DEP ☐ Other Person Who:

Name of PRP Organization: Browning Ferris Industries, Inc.

Name of PRP Contact: Chris Macera

Title: General Manager

Street: 1 Hardscrabble Rd.

☐ Check here if this PRP received a field NOR.

City/Town: Auburn

State: MA ZIP Code: 01501

Telephone: (508) 832-9001

Ext.:

FAX:

E. CONTRACTOR:

Contractor Name: New England Disposal Technologies

Telephone: (508) 756-1339

Ext.:

Name of Contact: Mike Robertson

☐ Check here if this is a State Contractor.

F. LSP:

LSP Name: Kenneth Snow

LSP Number: 3266

Telephone: (781) 273-1119

Ext.:

FAX:

G. MCP RESPONSE ACTIONS: (check any that apply)

☐ IRA Assessment Only ☒ IRA Oral Plan Approved* ☐ IRA Oral Plan Denied ☐ IRA Pre-notification

☐ Oral RAM Plan Approved* ☐ Oral RAM Plan Denied ☐ Notice of Intent to Conduct a URAM

Date of Action, if different from Log Date: * Provide details of approved plans on an RLFA.

☐ Check here if soil was removed from the site prior to notification. ☐ Check here if the soil was removed as part of an UST closure.

Quantity of soil previously removed and destination:

H. DEP ASSIGNMENT:

RNF Submittal Requested: ☒ Yes ☐ No From Who: BFI

Provisions of 21E Explained: ☐ Yes ☒ No Why Not: Already knew

Prepared By: Kevin W. Daoust

Regional Use:

Number of RLFA Pages Attached:

Staff Lead Assigned

(if different from Preparer):

☐ Check here if Release or TOR is unassigned.